



DEPARTMENT OF STATE

Washington, D.C. 20520

73-4396

DD/073-4271

August 1, 1973

The Honorable
William E. Colby
Central Intelligence Agency
Washington, D.C. 20505

Dear Mr. Colby:

I have recently replaced Ambassador Armin Meyer as Coordinator for Combatting Terrorism and have become familiar with the substantial contribution which your Agency makes in this important interagency effort. I hasten to express my great satisfaction with the working relationship in this sector between the Agency and the Working Group which I chair.

The excellent Agency research and documentation are invaluable as we attempt to reduce risks to our personnel and other interests abroad. Moreover, the performance of [] as our principal contact could not be improved upon. During the recent task force operation involving a Japanese airliner, for example, he and his colleagues provided indispensable counsel and materials. It is most reassuring to be able to count on such full and friendly cooperation as we pursue this often critical business.

STAT

Sincerely yours,

Lewis Hoffacker
Special Assistant
to the Secretary

State Dept. review completed

EXECUTIVE SECRETARIAT

Routing Slip

TO:		ACTION	INFO	DATE	INITIAL
1	DCI				
2	DDCI				
3	DDS&T				
4	DDI				
5	DDO	✓		3 AUG 1973	✓
6	DDM&S				
7	D/DCI/IC				
8	D/ONE				
9	OGC				
10	OLC				
11	IG				
12	D/PPB				
13	D/Pers				
14	D/OS				
15	D/Trng				
16	SAYA				
17	ASST/DCI				
18	AO/DCI				
19	Mr Colby		✓		
20					
21					
22					
SUSPENSE		8 August			

Remarks:

*Pls prepare acknowledgment
for Mr. Colby's signature*

JBC
Executive Secretary
8/3/73
Date

SENDER WILL			
UNCLASSIFIED	CONFIDENTIAL	SECRET	
OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	DATE	INITIALS
1	C/Ops Staff	6 Aug.	
2			
3	EA/DDO		
4	ADDO	8/6	
5			
6	DDO		
ACTION		DIRECT REPLY	PREPARE REPLY
APPROVAL		DISPATCH	RECOMMENDATION
COMMENT		FILE	RETURN
CONCURRENCE		INFORMATION	SIGNATURE
Remarks:			
<p>Would your staff please prepare an appropriate reply for Mr Colby's signature (8 Aug suspense)</p>			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
EA/DDO			
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